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APPLICANTS

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** CONTINUING DATA ***** *Name . OK*** FOREIGN APPLICATIONS ***** *Name . OK*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

06/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 15	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS

23125

TITLE

Magnetoresistive random access memory simulation

FILING FEE RECEIVED 1234	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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